

No.: HCFA-377, HCFA-378; Use: The HCFA-377 is the application used by an ASC wanting to participate in the Medicare program. The HCFA-378 is the survey form used by State survey agencies to determine ASC compliance with individual conditions of coverage. 42 CFR 416 is the regulation supporting the data collected on the HCFA-377 and HCFA 378; Frequency: Annually; Affected Public: State, local, or tribal governments, business or other for profit, not-for-profit institutions; Number of Respondents: 1,900; Total Annual Responses: 1,900; Total Annual Hours: 475.

6. Type of Information Collection Request: Reinstatement, without change, of previously approved collection for which approval has expired; Title of Information Collection: Medigap Complaint Database and Supporting Regulation 42 CFR 403.210 (b); Form No.: HCFA-R-156; Use: The Medigap database is maintained by the National Association of Insurance Commissioners, which in turn, sends the Medigap-relevant data to HCFA. The information is used to monitor State handling of Medigap related complaints; Frequency: Quarterly; Affected Public: Business or other for-profit; Number of Respondents: 1; Total Annual Responses: 4; Total Annual Hours: 160.

7. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Comprehensive Outpatient Rehabilitation Facility (CORF) Eligibility and Survey Forms and Information Collection Requirements in 42 CFR 485.56, 485.58, 485.60; Form No.: HCFA-359, HCFA-360, HCFA-R-55; Use: In order to participate in the Medicare program as a CORF, providers must meet Federal conditions of participation. The certification form is needed to

determine if providers meet at least preliminary requirements. The survey form is used to record provider compliance with the individual conditions and report findings to HCFA; Frequency: Annually; Affected Public: Business or other for profit, not for profit institutions, State, local, or tribal governments; Number of Respondents: 162; Total Annual Responses: 324; Total Annual Hours: 526 (reporting), 77,014 (record keeping).

To obtain copies of the supporting statement and any related forms, E-mail your request, including your address and phone number, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections should be sent within 30 days of this notice directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: October 28, 1996
Edwin J. Glatzel,
Director, Management Analysis and Planning Staff, Office of Financial and Human Resources, Health Care Financing Administration.

[FR Doc. 96-28621 Filed 11-6-96; 8:45 am]

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Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the

Office of Management and Budget, in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301)-443-1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Evaluation of the Ryan White HIV/AIDS Dental Reimbursement Program—Title 776(b) of the Public Health Service Act authorizes the Secretary to make grants to assist accredited dental schools and post-doctoral dental programs to meet uncompensated costs for providing oral health care to HIV infected individuals. A survey will be conducted to determine the effect this reimbursement program has had on the conduct of HIV/AIDS education and services within institutions and their graduates receiving these funds.

The survey will assess the effect the Program has had on (1) the support and commitment of institutions to HIV/AIDS education and the provision of care; (2) the scope, content and conduct of HIV/AIDS education in participating institutions, (3) increasing the access to oral health care by HIV/AIDS patients; and (4) improving the integration of oral health care with health care and long-term HIV/AIDS case management under other components of the Ryan White Act. The survey will compare dental schools and hospitals awarded Ryan White HIV/AIDS dental reimbursement monies with eligible institutions which did not participate in the reimbursement program. An initial mail questionnaire will be followed up by a telephone interview. The telephone interview will use Computer Assisted Telephone Interview (CATI) technology. Burden estimates are as follows:

Form name	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Telephone Interview	204	1	204	.75	153
Service Delivery/Program Questionnaire	204	1	204	2.00	408
Total	204	2	408	1.375	561

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Virginia Huth, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: October 30, 1996.
J. Henry Montes,
Associate Administrator for Policy Coordination.
[FR Doc. 96-28637 Filed 11-6-96; 8:45 am]
BILLING CODE 4160-15-P

Availability of Funds to Provide Technical and Non-financial Assistance to Federally Funded Migrant Health Centers

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of availability of funds.

CFDA #: 93.129.